

# Wisconsin Department of Regulation & Licensing

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## ATHLETIC TRAINERS AFFILIATED CREDENTIALING BOARD

### REQUIREMENTS FOR RENEWAL

1. Submit the renewal fee indicated on the renewal form.
2. Submit the signed renewal form stating that you have received 30 hours of BOC approved continuing education during the 2-year period immediately preceding the renewal date as specified in 448.9545 (1)(a) and (b).
3. Submit a photocopy of your current CPR card front and back.
4. Submit a photocopy of your certificate of insurance showing that you have in effect a surety bond in the amount of \$1,000,000.00 or malpractice liability insurance coverage in an amount that is not less than \$1,000,000.00 per occurrence and \$1,000,000.00 for all occurrences in one year. No licensee shall engage in athletic training unless the licensee has in effect the required insurance.
5. Describe your work history, including the average number of hours worked each week, for the 2-year period immediately proceeding the renewal date.

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6. Return this form with the statement signed by the licensee and the licensee's consulting physician that a current copy of the protocol required under s. 448.956 (1) is on file at the place of employment of the athletic trainer and of the consulting physician.

**Do not return the protocol form (#2517) to our office; keep for your records.**

I do hereby state that we have a current copy of the protocol form (#2517) on file in our place of employment.

\_\_\_\_\_  
Credential Holder Name (please print)

\_\_\_\_\_  
Consulting Physician (please print)

\_\_\_\_\_  
Credential Holder License Number

\_\_\_\_\_  
Consulting Physician License Number

\_\_\_\_\_  
Credential Holder Signature

\_\_\_\_\_  
Consulting Physician Signature